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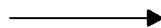
<b>REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT</b>	Application Number		09/988,020
	Filing Date		November 16, 2001
	First Named Inventor		HINDERKS
	Title	METHOD AND APPARATUS FOR INJECTION OF IP MULTICAST CONTENT INTO AN ATM DSL NETWORK	
	Atty Docket Number	3593-23	
	Group Art Unit	2665	
Examiner		R.A. Shand	

To: **Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

I hereby apply to withdraw as attorney or agent for the above identified patent application.

The reasons for this request are: The client's request letter of November 2, 2005.

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

**CORRESPONDENCE ADDRESS**☐ Customer Number
Place Customer Number  
Bar Code Label Here**OR**

<input checked="" type="checkbox"/>	Firm or Individual Name	DG SYSTEMS, INC.			
Address		750 W. John Carpenter Fwy.			
Address		Suite 700			
City	Irving	State	Texas	Zip	75039
Country	USA				
Telephone		Fax			

- ☒ This request is made on behalf of myself and
- ☒ all the attorneys/agents of record
- ☐ all the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number **23117**

This request is enclosed in **triplicate** (including any attachments).

Name Robert W. Faris, Reg. No. 31,352

Signature

Date November 14, 2005

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) and application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR. 1.14. This collection is estimated to take 12 minutes to completed, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.